



NAG- VIDARBHA CHAMBER OF COMMERCE

Behind IDBI Bank, Plot No.2, Gazetted Colony, Co-op Society, Near Rashaning Office, Museum Road, Civil Lines, Nagpur-440001 Tel : 0712-2522434, 7447446200 Email: nvccnag@yahoo.com

Membership Application Form

Dt. / /

Hon. Secretary

Nag Vidarbha Chamber of Commerce

Museum Road, Civil Lines, Nagpur-440001

Dear Sir, I/We a proprietor Concern/ a Partnership Firm/ a Private Limited/ a Public Limited Company desire to become member of Nag Vidrabha Chamber of Commerce.

I/We agree with the objects of Nag Vidarbha Chamber of Commerce and will abide by the rules & regulations of the Chamber.

I/We are enclosing here with Cheque no. _____ Bank _____

Rs. _____ favouring "Nag Vidarbha Chamber of Commerce" towards membership fees for the Year _____

	ADMISSION FEES	ANNUAL SUSCRPTION	GST @18%	Total
Proprietor Concern	Rs. 3,000/-	Rs. 315/-	Rs. 597/-	Rs. 3912/-
Partnership Concern	Rs. 3,000/-	Rs. 315/-	Rs. 597/-	Rs. 3912/-
Private Limited Co.	Rs. 3,000/-	Rs. 515/-	Rs. 633/-	Rs. 4148/-
Public Limited Co.	Rs. 3,000/-	Rs. 515/-	Rs. 633/-	Rs. 4148/-

The details information is enclosed herewith in the format given by you.

Yours Faithfully
(Signature and Designation with Seal)

Title of Membership

Name of the Firm/ Company :- _____

Proposed by :- _____

:- (Name) _____

Seconded by :- _____

:- (Name) _____

(Only NAG VIDARBHA CHAMBER OF COMMERCE member can be Proposer/ Seconder)

FOR OFFICE USE

Member Application accepted by Executive committee at its meeting Dated : / /

(Any Two Signatory)

(PRESIDENT)

(HON. SECRETARY)

(TREASURER)

Membership Fee MR No. _____ Date _____

Membership No.:- _____

NOTE : NAG VIDARBHA CHAMBER OF COMMERCE reserve the right to accept or reject membership application without assigning any reason whatsoever.

The Details of Membership are as under :

Membership No. _____

Name of the Firm/ Company :- _____

Address :- _____

City :- _____ Pin code _____

Phone No. :- (O) _____
:- (R) _____ Fax No. _____
:- Mobile _____ Email) _____

Nature of Business :- Manufacturing/ Trading/ Commission Agent/ Profession

Dealing in _____ (Items)

Constitution :- Proprietorship/ Partnership/ Pvt. Ltd. Co./ Public Ltd. Co.

Name of Representative :- 1) _____
2) _____

INFORMATION:

1) Are you affiliated to any Trade Association? If yes:

Name of Association _____

Post : Member/ Executive Committee Member/ Office Bearer as on Date : / /

Association Phone No's : _____

2) Your area of interest for your contribution to NAG VIDARBHA CHAMBER OF COMMERCE

Please Specify the Subject _____

- a) Contribution of Legal Advisory cell
- b) Publication Section/ Library of Chamber
- c) Seminar on Various Subjects
- d) Any other suggestion regarding your contribution

Date : / /

Authorised Signatory
(with Rubber Stamp)

Enclosure:

- 1) Copy of Pan Card
- 2) Address Proof (Aadhar Card/ Electric/ Telephone Bill)
- 3) Cheque should be drawn in favour of NAG VIDARBHA CHMABER OF COMMERCE
- 4) Copy of Shop/ Estt. Registration
- 5) Copy of GST Registration